

DYNAMIS

Acta Hispanica ad Medicinae Scientiarumque Historiam Illustrandam

VOLUMEN 28

2008

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DOSSIER: IMPROVING PUBLIC HEALTH AMIDST CRISES: THE INTERWAR YEARS IN EUROPE

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Improving public health amidst crises. Introduction

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ABSTRACT: The economic depression of the 1930s represented the most important economic and social crisis of its time. Surprisingly, its effect on health did not show in available morbidity and mortality rates. In 1932, the League of Nations Health Organisation embarked on a six-point program addressing statistical methods of measuring the effect and its influence on mental health and nutrition and establishing ways to safeguard public health through more efficient health systems. Some of these studies resulted in considerations of general relevance beyond crisis management. Unexpectedly, the crisis offered an opportunity to reconsider key concepts of individual and public health.

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ABSTRACT: The first serious attempts to deal with public health problems in Greece were undertaken between 1925 and 1935. This period also witnessed setbacks to developments in public health, caused by the lack of welfare infrastructure for social relief, as well as extensive health problems brought about by the settlement in Greece of 1,300,000 refugees from Asia Minor. In 1928 following the example set by other European countries, the Liberal Government appealed to international health organisations for support in order to effectively deal with these problems. This contribution constitutes a case study addressing the following issues: a) the impact the League of Nations Health Organisation intervention had on the establishment of public health services; b) the framework for a collaboration of the Rockefeller Foundation and the League of Nations Health Organisation; and c) the factors that led to the failure of the health care reorganisation.

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ABSTRACT: This article explores the emergence and recognition of silicosis as an occupational disease in interwar Spain. Following International Labour Office guidelines, growing international concerns and local medical evidence, Republican administrators provided the first health care facilities to silicosis sufferers, who eventually became entitled to compensation under the Law of Occupational Diseases (1936), poorly implemented due to the outbreak of the Civil War (1936-39). Silicosis became a priority issue on the political agenda of the new dictatorial regime because it affected lead and coalmining, key sectors for autarchic policies. The Silicosis Scheme (1941) provided compensation for sufferers, although benefits were minimised by its narrow coverage and the application of tight criteria.

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ABSTRACT: This paper focuses on the health reforms during the republican Spain (1931-1939) and the crisis derived from the three-year of civil war. It considers how the war affected the health system and the impairment of health conditions of the population during the late 1930s, considering the changing conditions caused by the conflict. Some of the specific topics analysed are the changing healthcare system, the adaptation of health organization after the outbreak of the war, the impact of the war on the health of the population and epidemiological changes, the problem of the refugees and the clinical studies by experts, mainly on undernourishment.

«Air, sun, water»: Ideology and activities of OZE (Society for the preservation of the health of the Jewish population) during the interwar period

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ABSTRACT: This paper follows the social and political history of OZE —the Society for the Preservation of the Health of the Jewish Population, in the interwar period. We focus on two campaigns against typhus and favus, the first two disease oriented efforts by OZE, in order to reconstruct the operational approaches, considerations and obstacles faced by OZE as a Jewish organization and transnational participant in the discourse on the health and politics of minorities between two world wars. The analysis of OZE as a transnational Jewish relief organization has a wider significance as an example of international organizations originating from civil initiatives to promote the health of minorities through field work and politics.

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thers' clinics – (Mødrehygienekontorer). 5.—Discussing fertility and infant health. 6.—Sterilisation – part of welfare policies? 7.—Conclusion.

ABSTRACT: This paper focuses on initiatives to improve infant health as developed in Norway, especially during the interwar period. Falling birth rates were felt as a menace to the survival of the nation and specific initiatives were taken to oppose it. Crises engendered by the reduction in fertility strengthened opportunities for introducing policies to help the fewer children born survive and grow up to become healthy citizens. Legislation supporting mothers that had started in 1892 was increased in the interwar years and included economic features. Healthy mother-and-baby stations and hygiene clinics for monitoring births were developed by voluntary organisations inspired by France and England, respectively. A sterilization law (1934) paralleled some German policies.

Public health in interwar Britain: did it fail?

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1.—Public health in Interwar local government. 2.—The historiography of interwar public health. 3.—Public health and population health. 4.—Did public health fail? A case study from the South-West. 5.—Conclusion.

ABSTRACT: British historians initially saw the interwar period as a «golden age» for public health in local government, with unprecedented preventive and curative powers wielded by Medical Officers of Health (MOsH). In the 1980s Lewis and Webster challenged this reading, arguing that MOsH were overstretched, neglectful of their «watchdog» role and incapable of formulating a new philosophy of preventive medicine. The article first details this critique, then reappraises it in the light of recent demographic work. It then provides a case study of public health administration in South-West England. Its conclusion is that some elements of the Lewis/Webster case now deserve to be revised.

ARTICLES

On the original meaning of the Greek word *epidēmía* and its identification with the Latin term *pestis*

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1.—Introduction. 2.—The term epidemic between *Corpus Hippocraticum* and Galeno. 3.—The *generalis epidemia* (1347-1361). 4.—*Ad fontes*: Humanist translations of the term epidemic. 5.—Conclusions.

ABSTRACT: In this paper, the original meaning of the term epidemic and its subsequent identification with plague are studied. Originally, epidemic (*epidēmía* in Greek) means visitation and/or arrival, which in a medical context implies the visit of the doctor to the patient and/or vice-versa, whereas plague (*pestis* in Latin) concerns a non-specific contagious disease. Several texts of Greek authors reporting these initial concepts dealing with *epidēmía* are shown. However, be-

cause of a nosocentric interpretation, epidemic (*epidēmia*) will mean in essence a severe and spreading (communicable or transmissible) disease like plague, so that «epidemic» and «plague» have become practically synonymous.

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ABSTRACT: In this paper we study the Renaissance reception of some of the most important topics of Celsus' *De medicina* in works about surgery and in its practice. Our research mainly focuses on the socioprofessional aspect, with the surgeons' defence of the dignity of their discipline dignity, and on the 16th-century reception of Celsus' most highly valued doctrines

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ABSTRACT: In this essay, I scrutinize the differences between Galileo's and Huygens's demonstrations of free fall, which can be found respectively in the *Discorsi* and the *Horologium*, from a mathematical, representational and methodological perspective. I argue that more can be learnt from this type of analysis than from the thesis that Huygens re-styled Galilean mechanics, which is a *communis opinio*. I argue that the differences in their approach to free fall highlight significantly different mathematical and methodological outlooks.

Medical discourse and municipal policy on prostitution: Palma 1862-1900

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ABSTRACT: During the 19th century, prostitution aroused strong emotions in most European cities. Palma de Mallorca was no exception and, in common with

many Spanish cities at that time, regulated this activity. The objectives of this paper are to analyze the Mallorcan medical discourse on syphilis, evaluate the concept of venereal disease as social stigma and, finally, examine municipal policy on prostitution.

The building of a new medical centre for tropical diseases in Portugal. The School of Tropical Medicine and the Colonial Hospital (1902-1942)

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ABSTRACT: The School of Tropical Medicine was founded in 1902 along with the Colonial Hospital of Lisbon. The Portuguese government recognized the importance of colonising the tropics and therefore supported the creation of a specific locus of medical training that would prove to be crucial to the clinical and experimental study of tropical diseases. This paper examines the importance of such institutions for the emergence of a new scientific area of research while also functioning as a consolidation factor for the Third Portuguese Colonial Empire. The creation of a new concept of medical practice with respect to tropical diseases characterizes a specific aspect of colonization: it underlies and drives the discourse of colonization itself. Consultation of data collected by the Portuguese Tropical School and the Colonial Hospital during the period between 1902 and 1935, the starting point of the present study, seeks to shed light on the ongoing debate concerning the history of tropical medicine within European colonial discourse.

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ABSTRACT: The production of the pharmaceutical laboratories is a valuable source in the study of the social history of therapeutics, even if it reflects only in a limited and indirect way the therapeutic practice itself. A first approach to the vegetable liquid extracts produced by the company «Codex» in Mexico during the second quarter of the 20th century reflects the diversity of the flora used as prime matter, involving several therapeutic properties then endorsed by regulatory authorities. The therapeutic indications of the extracts embraced a wide range of diseases and ailments, and 45.8% of the species used were collected or grown in Mexico. The liquid extract form produced by the pharmaceutical technology

of the time gave the clinician access to the therapeutic potential of medicinal plants. It allowed flexibility in prescriptions, using combinations defined by the physician according to the changing condition of the patient. However, 70 years later, these products lack authorization as direct therapeutic resources, despite the absence of studies invalidating many of the old registered therapeutic attributions. In their origins and indications, these products indirectly attest to a time of transition in pharmaceutical production, in prescriptive practice and in the development of biomedical therapeutics in Mexico.

Designs of devices: The vacuum aspirator and American abortion technology

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ABSTRACT: In 1965, 71% of legal abortions in the United States were performed using the surgical procedure of dilation and curettage. By 1972, a mere seven years later, approximately the same percentage (72.6%) of legal abortions in the United States were performed using a completely new abortion technology: the electrical vacuum aspirator. This article examines why, in less than a decade, electric vacuum suction became American physicians' abortion technology of choice. It focuses on factors such as political and professional feasibility (the technology was able to complement the decriminalization of abortion in the US, and the interests, abilities, commitments, and personal beliefs of physicians); clinical compatibility (it met physician/patient criteria such as safety, simplicity and effectiveness); and economic viability (it was able to adapt to market factors such as production, cost, supply/demand, availability, and distribution).

The notion of disability and its transformation through the 1980 and 2001 WHO international classifications of disability

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health. 3.2.—A «biopsychosocial» model to describe health, disability and functioning. 3.3.—Disability as a functioning deficit. 4.—Conclusion.

ABSTRACT: In this paper, the author analyses the evolution of the notion of disability. She focuses on the two classifications of disability published by the WHO in 1980 and in 2001. The first classification, «The International classification of Impairments, Disabilities, and Handicaps», was an extension of the «International Classification of Diseases», and disability refers to the social consequences of diseases. In the «International Classification of Functioning, Disability and Health», published in 2001, disability refers to a functioning difficulty and is linked to the notion of health. The author analyses the question of the norms used in the two classifications to define disability.

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